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APPLICANTS

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** CONTINUING DATA ***** *SP*

** FOREIGN APPLICATIONS *****

UNITED KINGDOM 0401469.2 01/23/2004 *SP*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 06/15/2004

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	UNITED KINGDOM	DRAWING 12	CLAIMS 16	CLAIMS 1
Verified and Acknowledged	Examiner's Signature <i>SP</i> Initials				

ADDRESS

22442
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TITLE

Injection device

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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